

... 201 DIVISION

JFW/DAC \$

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to:

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

2004 DEC 21 Fil 3:24

On 12-9-04

TOWNSEND and TOWNSEND and CREW LLP

By: Dallen Clark

PATENT
Docket No. 017761-004000US

RECEIVED

DEC 27 2004

OFFICE OF PETITIONS

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

OREN A. MOSHER et al.

Application No.: 10/768,780

Filed: January 30, 2004

For: HEATING METHOD FOR TISSUE CONTRACTION

Examiner: Unassigned

Art Unit: 3762

CORRECTION OF ERROR IN SMALL ENTITY STATUS AND PAYMENT OF DEFICIENCY OWED UNDER 37 CFR §1.28(c) AND MPEP 509.03(x)

December 9, 2004

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

The above-identified application filed on January 30, 2004 originally claimed small entity status in good faith. However, it has recently been discovered that such status as a small entity was established in error. The following submission and itemization are believed to meet the requirements of 37 C.F.R. Sections 1.28(c)(1) and (c)(2) and MPEP Section 509.03(X). Therefore, Applicants respectfully request the deficiency payment be processed and the correct entity status be accorded to the application.

OREN A. MOSHER et al.
Application No.: 10/768,780
Page 2

PATENT

2004 DEC 21 PM 3:24

RECEIVED

DEC 27 2004

ITEMIZATION AND CALCULATION OF THE DEFICIENCY OWED**OFFICE OF PETITIONS**

DATE FILED	TYPE OF FEE	SMALL ENTITY FEE ACTUALLY PAID	(CURRENT) LARGE ENTITY FEE FOR ACTION	DEFICIENCY PAYMENT OWED
01/30/2004	Utility Filing Fee	\$385.00	\$790.00	\$405.00
01/30/2004	Total Claims	\$135.00	\$750.00	\$615.00
01/30/2004	Independent Claims	\$86.00	\$400.00	\$314.00

TOTAL DEFICIENCY PAYMENT OWED: \$1334.00

Applicants hereby authorize the Commissioner to deduct the total deficiency owed of \$1334.00 from Deposit Account No. 20-1430. Please deduct any additional fees due from, or credit any overpayment to, the above-noted Deposit Account.

Applicants understand that under 37 CFR §1.28(d) this submission is treated under § 1.27(g)(2) as a notification of loss of entitlement to small entity status.

If the Examiner believes a telephone conference would expedite prosecution of this application, he is invited to telephone the undersigned at 415.576.0200.

Respectfully submitted,

Nena Bains
Reg. No. 47,400

TOWNSEND and TOWNSEND and CREW LLP
Two Embarcadero Center, 8th Floor
San Francisco, California 94111-3834
Tel: (415) 576-0200
Fax: (415) 576-0300
NB/lc
60369811 v1



FEET TRANSMITTAL for FY 2005

Effective 10/01/2004. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)
1334

Complete if Known	
Application Number	10/768,780
Filing Date	January 30, 2004
First Named Inventor	Mosher, Oren A.
Examiner Name	Unassigned
Art Unit	3762
Attorney Docket No.	017761-004000US

RECEIVED

DEC 27 2004

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order Other None
 Deposit Account:

Deposit Account Number: 20-1430

Deposit Account Name: Townsend and Townsend and Crew LLP

The Director is authorized to: (check all that apply)

- Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) or any underpayment of fee(s)
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)		
1001 790	2001 395	Utility filing fee	
1002 350	2002 175	Design filing fee	
1003 550	2003 275	Plant filing fee	
1004 790	2004 395	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	

SUBTOTAL (1) (\$)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

		Extra Claims	Fee from below	Fee Paid
Total Claims			X	
Independent Claims			X	
Multiple Dependent		X		

Large Entity	Small Entity	Fee Description
Fee Code (\$)	Fee Code (\$)	
1202 18	2202 9	Claims in excess of 20
1201 88	2201 44	Independent claims in excess of 3
1203 300	2203 150	Multiple dependent claim, if not paid
1204 88	2204 44	** Reissue independent claims over original patent
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

OFFICE OF PETITIONS

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)
1051	130	2051	65
1052	50	2052	25
1053	130	1053	130
1812	2,520	1812	2,520
1804	920*	1804	920*
1805	1,840*	1805	1,840*
1251	110	2251	55
1252	430	2252	215
1253	980	2253	490
1254	1,530	2254	765
1255	2,080	2255	1,040
1401	340	2401	170
1402	340	2402	170
1403	300	2403	150
1451	1,510	1451	1,510
1452	110	2452	55
1453	1,330	2453	665
1501	1,370	2501	685
1502	490	2502	245
1503	660	2503	330
1460	130	1460	130
1807	50	1807	50
1806	180	1806	180
8021	40	8021	40
1809	790	2809	395
1810	790	2810	395
1801	790	2801	395
1802	900	1802	900

Other fee (specify) Correction of Error in Small Entity Status and Payment of Deficiency Owed Under 37 CFR § 1.28(c) and MPEP 509.03(x)

1334

*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$1334)

SUBMITTED BY				
Name (Print/Type)	Nena Bains		Registration No. (Attorney/Agent)	47,400
Signature			Date	12/9/04

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

60369989 v1



DIVISION
PTO/SB/21 (09-04)

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	10/768,780
		Filing Date	January 30, 2004
		First Named Inventor	Mosher, Oren A.
		Art Unit	3762
		Examiner Name	Unassigned
Total Number of Pages in This Submission	5	Attorney Docket Number	017761-004000US

2004 DEC 21 FIL 3:21

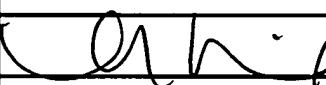
ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Postcard
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	Correction of Error in Small Entity Status and Payment of Deficiency Owed Under 37 CFR §1.28(c) and MPEP 509.03(x)
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.

RECEIVED

DEC 27 2004

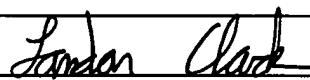
OFFICE OF PETITIONS

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Townsend and Townsend and Crew LLP		
Signature			
Printed name	Nena Bains		
Date	12/9/04	Reg. No.	47,400

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Signature			
Typed or printed name	Landon Clark	Date	12-9-04